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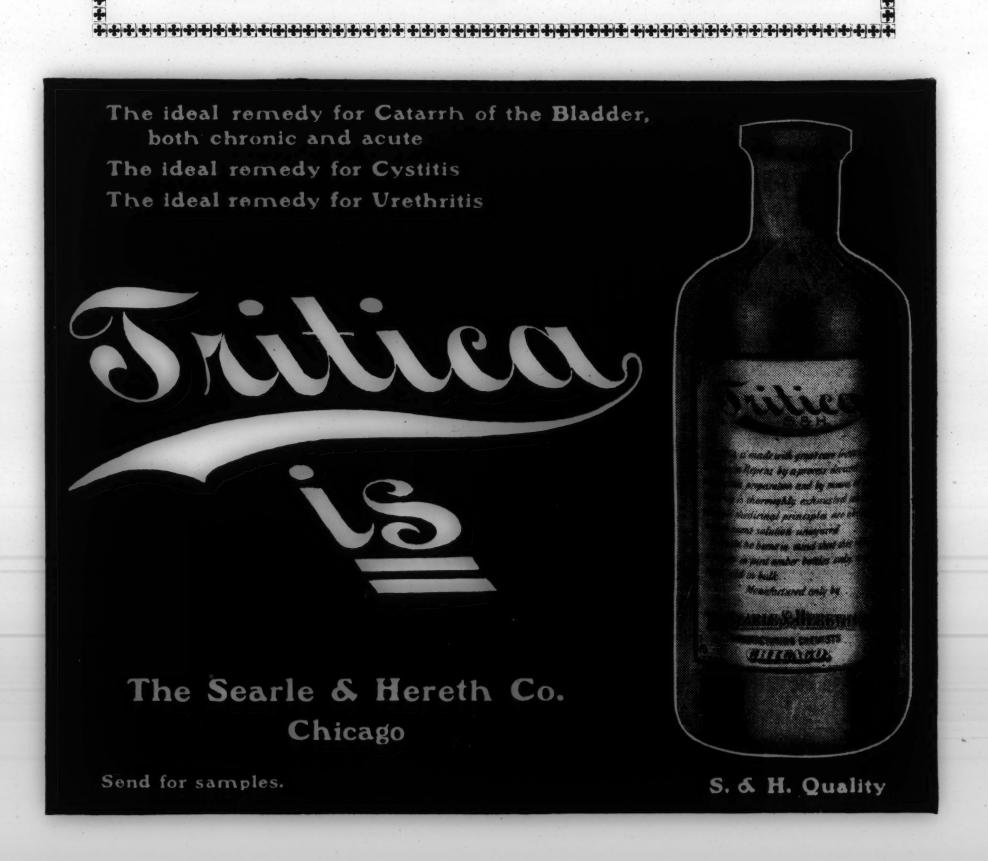
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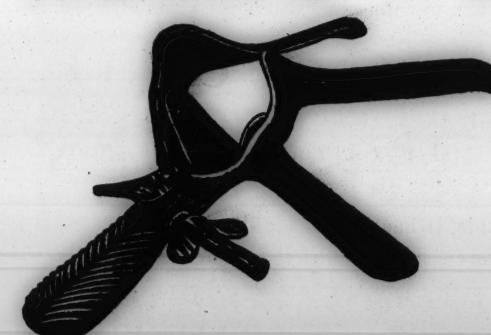
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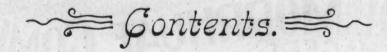
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CALIFORNIA MEDICAL JOURNAL.

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Pneumonia.

G. D. RICH, M. D., SONOMA, CAL.

PNEUMONIA is divided into two general forms: Fibrinous Pneumonia (Croupous Pneumonia or Lobar Pneumonia), and Broncho Pneumonia (Lobular Pneumonia Capillary Bronchitis or Catarrhal Pneumonia).

Fibrinous pneumonia is an acute, infectious disease due to the invasion of the lung with a highly inflammatory product manifesting characteristic symptoms and usually running a typical and rapid course.

Broncho pneumenia is a catarrhal inflammation of the lung usually bilateral and generally secondary to bronchitis.

The writer will limit his remarks to Fibrinous Pneumonia.

Pneumonia is a disease that should receive much study and consideration from every practitioner of medicine. When our attention is directed to the fact that ten per cent of all deaths from acute disease is caused by pneumonia we can readily understand why the above suggestion is timely and reasonable.

Pneumonia is a disease that is known in every country, but more prevalent in colder climates.

The causes of pneumonia are divided into two general forms—predisposing and exciting. Predisposing causes include impairment of the tissues or the vital forces, thereby increasing the susceptibility of the individual to the efficient causes, cold, chronical prisms, etc. The exciting causes are exposure, location, etc. We must always take into account that anything which has a tendency to lessen the power of resistance of the body is an important factor in determining a cause of pneumonia.

In considering the various ætiological factors of pneumonia we must not lose sight of other influences. According to the laws governing physiology, inequality of the secretory functions, which directly results in inequality of blood pressure plays an important role

in the etiology of pneumonia. The action of the vegetable sedatives administered to patients suffering from acute fibrinous pneumonia corroborates the rationality of the latter statement. If we expect to meet with success in the treatment of pneumonia, it is a demonstrated fact that we must promote the secretions and equalize the circulation. Symptoms:—A feeling of indifference is the first manifestation but there are no well defined prodronal symptoms.

In outlining the symptoms of pneumonia we must take note of the extreme differences to be found. On the one hand the onset may be sudden, the symptoms well defined and the course typical. On the other hand the onset is insidious, the symptoms obscure and the course irregular. However, the lungs are the seat of lesion and manifest symptoms in accordance with the severity of the attack. Again inequality of the secretory functions and blood pressure, which disturbs the normal equilibrium of the bronchial and pulmonary arteries and especially the pulmonary arteries, will manifest symptoms according to the systemic reactions.

Fibrinous pneumonia generally begins with a sudden chill, which may be severe or mild, and carries no significance regarding the severity of the disease. Following the chill there is a rise of the temperature and other symptoms accompanying fever. Pain, as a rule, is a prominent symptom, especially if the pleura is involved. This is manifested by a sharp cutting pain on inspiration. However, it is well to bear in mind that the pain may be very slight

and in some cases entirely absent. The next symptom of importance is dyspnœa, which is due to a lack of æration of the blood occasioned by pulmonary congestion. Cough is generally noticeable and the sputum is usually frothy, bloody and viscid. In early stages we will most always have increased vocal fremitus, and crepitant rales may be heard on inspiration. Cheeks are flushed, nostrils dilated, skin hot and dry, and the expression anxious. The pulse is frequent, full and strong. Respiration is frequent and shallow. At this stage, in alcoholic subjects, delirium may be present. Later on consolidation takes place and the acute symptoms subside; however, it is well to remember that cases are on record that present a typical picture of pneumonia save consolidation. Headache is usually present accompanied with anorexia backache, high colored urine, and diminished chlorides. When the disease is unilateral the patient lies on the affected side. Between the fourth and eighth day resolution takes place, the temperature subsides either by crisis or lysis and the secretions begin to establish their normal functions. Cough is loose and less painful, respiration easier and there is a general improvement in the systemic condition.

The temperature in pneumonia is most always high, ranging from 103° to 105° F. In some cases you can note a fall in the temperature on about the fourth or fifth day (pseudocrisis) but as a rule crisis takes place about eighth day. A persistence of an elevated temperature after crisis is an indication of a complication. One of the important

things in caring for a pneumonia case is, to make frequent examinations. The increased frequency of respiration is out of proportion to the acceleration of the pulse beat. The normal ratio of the former to the latter being 1:4. In pneumonia, ratio may be so increased as to be 1:2 or even less.

Diagnosis—The diagnosis of pneumonia usually present very little difficulty, as the symptoms are characteristic and the course typical. The sudden onset, localized pain, rapid breathing, cough and rusty sputum, and solidification of the affected area of the lung, is usually characteristic. Frequently we will meet cases presenting delayed, dullness or it may be entirely absent, then we must make our diagnosis by exclusion. When we meet with a case manifesting rapid breathing and increased temperature, without corresponding increase of the pulse, it is our duty to make a careful physical examination.

Prognosis—The mortality of pneumonia is high. Some of our very best authorities claim that 16 to 23 % of the cases of pneumonia prove fatal. However, it is to be remembered that personal equation, efficient causes and determinal circumstances should govern our prognosis. Location should always have weight in making a prognosis of pneumonia. It is not reasonable to compare the mortality of the high altitudes, say Colorado, with the more equable climate of California, especially the lower section on the Pacific Coast. The extent of the consolidation determines in a great measure the prognosis. The greater the amount of consolidation the more grave the prognosis.

Double pneumonia is more serious than pneumonia of only one lung. Apical pneumonia is considered more fatal As before than basal pneumonia. stated, personal equation must always be considered. Pneumonia occurring in nephritis, organic disease of the heart, emphysemia or any condition that has affected the powers of natural resistence of the body is just reason for giving a grave prognosis. Those cases approaching dissolution present following picture:—superficial breathing, cyanosis resulting from apnoca, pulse rapid, irregular and weak. Respiration is accompanied by moist bronchial rales, the patient becomes drowsy, comatoes, and the cord of life is broken.

TREATMENT—Before a physician can rationally treat pneumonia or any other disease, it is necessary that he should be well informed as to the efficient causes, pathological and clinical indications and understand the teachings of direct or specific medication.

There is no definite treatment for pneumonia. Give the indicated medicine to meet the symptoms.

In caring for patients suffering from pneumonia there are two things to bear in mind—Sustain the vitality of the patient; promote the secretions.

It might be well to contrast two types in order that we may get a better understanding regarding the clinical indications.

Take a robust individual with full, bounding pulse, high temperature, suppressed secretions, dyspnœa, cough and general restlessness. We will assume that the above is a typical case of pneumonia omitting other symptoms. The

first consideration of importance is to promote the secretions, not by administering drastic cathartic, diaphoretics, diuretics, or any of the synthetic preparations derived from coal tar, but follow the directions laid down in "Specific Medication" and we readily determine that veratrum viride is the indicated remedy. Veratrum will remove the obstruction in the smaller capillaries through its action upon the vaso-motor nerves, thereby slowing the pulse and promoting free diaphoresis and in a great measure controlling the tempera-Take the above type with cerebral congestion of the active form, manifested by bright eyes and contracted pupils, flushed face and a general nervous irritability, and gelsemium in conjunction with veratrum is directly indicated.

Take another type and the personal equation of the individual is of the asthenic nature, and the severe toxic nature of the cause or its products overthrow the constitutional resistance, and the careful clinical observer is impressed with the importance of interpreting the signs, because the treatment is radically different from the former type. In the above outlined case we have the rapid quick pulse: temperature may range from 101° to 104° F, dyspnoca and cyanosis marked, cheeks flushed and dilated nostrils. Here is a type that is suffering from inequality of blood pressure. The extremities are cold, accompanied by a general pallor of the skin. Do we intend to administer veratrum to this patient? No, a thousand times no! The above case absolutely contraindicates all therapeutic measures of a depressing nature. It might be claimed that aconite is indicated but a careful study of the case and the physiological action of aconite, will direct our thoughts to other measures of relief. Let us place this patient in a large light room with plenty of fresh air; keep the temperature about 70°; give the patient a hot bath with water containing alcohol, and follow the same up with a brisk rub. After you have finished the rubbing place the patient between blankets and put hot water bottles to the feet. Here we must insist that all remedial agents of a stimulating nature be immediately followed up with nourishment. Take white of one egg and put into a glass, add Zii of sweet milk and same quantity of hot water, to this mixture add 10 drops of spiritus ammonia aromaticus and give at one dose every three hours. If patient cannot take above preparation, any fluid diet that appeals to the physician in charge may be administered, but do not leave out the aromatic ammonia. There are other stimulants that are more powerful than this preparation of ammonia, but they are contraindicated in the above case for the reason that we do not want to call out more of the latent forces than is absolutely necessary.

In treating patient suffering from pneumonia it is necessary to give due attention to the secretory functions; note the condition of the bowels, see that the kidneys are performing their normal function, also examine the urine for the chlorides. If absent it will be necessary in asthenic cases to administer normal salt solution, either by transfusion into veins or inject into the tissues, as physician may prefer.

Those cases with involvement of the pleura, manifested by severe acute cutting pains, on inspiration, will be benefitted under the administration of bryona alba.

Cough is sometimes very annoying and may require our attention but under no circumstances are the time-honored expectorants admissible. If the cough is loose and the secretions abundant belladonna acts very well. If the above remedy is too old to suit your 20th century mind, you may administer heroin in 1-20 grain doses and derive good results, but to those of you who are willing to give belladonna a trial in the above indicated condition, I assure you that it will answer all purposes. It is over-drugging in pneumonia that we must avoid. A dry cough rarely demands attention; however, should it be necessary to give something, oil of eucalyptus, say five to ten drops in a cup of boiling water, and inhale from three to five minutes, and repeat every three hours, or ipecac. in small doses will be all that is needed, and I want to state that they are capital agents.

I only mention the cold pack to condemn it. It is always well to apply something locally; it has a good psychical effect on both patient and the members of the family; there is nothing better than turpentine and lard, one part of the former to four parts of the latter. Apply to the chest and cover with absorbent cotton. Antiphlogistine is also a firstclass local application, and some people will like it better because it is used in hospitals, and is quite a fad. It is always best to heat antiphlogistine before applying. Drop can into hot water and let stand a few minutes and it will be ready for application; cover with absorbent cotton and change every twenty-four hours.

For notes on the symptomatology and diagnosis the writer respectfully acknowledges reference to Fitz and Smith.

X-Ray Cure of Sarcoma.

J. W. HAMILTON, M. D., PARROTT BUILDING, SAN FRANCISCO.

Prof. of Gynæcology, California Medical College.

ON July 1st Mr. Hurshfelt called upon Dr. Gere for examination, and after going over his case thoroughly he decided that he was suffering from a sarcoma upon the shoulder. We decided to treat it with the X-ray which I did, beginning on July 1st. I used

a high power tube and exposed the tumor to the ray for about five minutes each time each day for fifteen exposures. Then for one week every other day. At the end of the week I returned to the six exposures a week until August the 16th. On that day while coming

to the office he was injured by being knocked down on the street by a carelessly driven team, and was laid up for several weeks. I was therefore much worried about my case as the tumor, though greatly diminished, was not well. When he was able, some time near the middle of September, to again visit the office, what was my surprise to find the tumor entirely gone. There has been so many cases of cancer reported in which the disease and the cure entirely depended upon the word of the operator, that in this instance I took pains to show the case to a large number of physicians, that the character of the disease and the cure might

be well authenticated. Among the number were Dr. Perce, of Long Beach, Dr. Hunsaker, Dr. Byron, Dr. Schmitz and many others. During the exposures I held the tube from four to eight inches from the tumor, of course, using a lead mask to protect all the parts, except the tumor. I got a slight dermatitis and I feel confident that that hastened the cure. I gave no medicine; dressed the tumor each day with a cotton compress saturated with carbolic solution, held in place by a rubber adhesive strap, and when the tumor began to break down I used echofolta on the compress. The patient suffered no pain after the first five treatments.

Cactus Grandiflorus.

LYDIA ROSS, M. D., WATERTOWN, MASS.

Extract from reprint in ECLECTIC REVIEW.

ACTUS is useful in gynæcological practice. In oppressive headache at the top of the head, with nervousness not uncommon at the menopause, resulting from pelvic irritation or congestion or profuse menorrhagic losses, it is helpful. I would emphasize the value of this drug in relieving the peculiar vaso-motor wrongs known as "hot flashes" of the climacteric. The surprise manifested by most women upon hearing that they can be relieved of this symptom shows the need of acquainting the profession with this use of cactus. For hot flashes, small doses of this remedy seem to be almost specific, proving a welcome addition to our

limited resources in controlling this symptom, as common at the menopause as it is distressing. The melancholia, nervousness, headache, irritability of temper, hypersensitiveness, neuralgia, as well as the vague fears and fancies which show disordered innervation of vascular and nervous systems at this period of transition, are all favorably influenced by cactus grandiflorus.

For muscular pain in the back, loins and thigh, and for dragging pains and soreness in the uterus, slow, irregular, scanty or prolonged menstruation, do not overlook cimicifuga.—*Medical Summary*.

Surgical Hints.

[From the International Journal of Surgery,]

In passing a sound, no deviation from the median line can possibly be of service. If the sound cannot be introduced with the aid of patience and gentleness, rough methods will certainly not succeed.

[This is not a safe general rule, for a sound will often pass through the urethra by its own weight in devious ways, though holding it to the median line, as above suggested, would necessitate force to pass it through.—Ed.]

In every case of coma, whether from alcohol or any other cause, always investigate the bladder by percussion, in order, to find out whether there is a retention of urine. Should this be the case, measures must at once be taken to empty the bladder. If coma is due to nephritic trouble, it must not be forgotten that the fact that no urine has been passed for a long time may be due to suppression instead of retention.

[We have only to add to this, that if the coma is of nephritic origin, and is accompanied by suppression of urine, it is well to promptly apply dry cups or active sinapisms or even blistering to the lumbar regions, at the same time that there is administered an active hydrogogue cathartic, for instance, elaterium in one-fourth-grain doses every hour. The patient may also be thoroughly sweated. This relieves the blood of poison, and the kidneys of work, while the counter-irritation relieves them of likely engorgement.—Ed.]

Cases in which there is dribbling of

urine in the bed, attended by the usual disagreeable smell, can be made less obnoxious by pouring some turpentine upon the sheets, where it will not touch the patient's skin. This counteracts the odor to a remarkable degree.

[While this combination of turpentine and ammonia, for that is what the urinous smell complained of usually is, may have a neutralizing effect upon a certain proportion of individuals, there are many to whom the one will only prove an aggravation when added to the other. We would prefer bathing with very dilute sulphuric acid for its effect upon the alkaline urine, and a weak solution of formalin for its disinfecting qualities.—Ed.]

It is an invariable rule that, in cases of stricture, whether urethral or due to prostatic trouble, if a catheter has been passed with much difficulty, the bladder should be washed through it and the catheter left in situ for twenty-four hours. This will always permit the introduction of a large instrument later on.

[This is correct, but such use of a catheter makes it necessary that it should have been previously boiled for at least twenty minutes in some good antiseptic solution before being introduced.—Ed.]—Clinical Notes.

The oldest practicing physician in the United States is said to be Dr. O. R. Skinner, of Freehold, N. J., who is in his 93rd year. He was a surgeon in the late civil war. He is kept busy with his professional duties and answers promptly all calls.—The Medicus.

The Disadvantages of Copper Sulphate in Diseases of the Conjunctiva and Cornea.

The author asserts, as the result of his experience, that copper sulphate in ocular affections is harmful, and that any of its seeming good effects may be obtained by the use of safer and practically painless means. Trachoma is most successfully treated with frequent irrigations with weak bichloride solution in normal salt.—Dr. Cornelius Williams, in Medical Record.—N. Y. Med. Journal

[An important warning, very necessary to bear in mind. This should be copied and permanently placed where frequently seen.—Ed.]—Clinical Notes.

Hand Sterilization.—Simon Marx (Medical Critic) in obstetric work depends almost entirely on successive scrubbings with: 1, green soap and water with a sterile brush; 2, scrubbing with a 65 per cent solution of alcohol; 3, scrubbing and soaking the hands and arms in a 1:1000 solution of bichloride of mercury, and then thorough rinsing with a sterile salt solution.—

Ibid.

Extract from "Treatment of Diphtheria," by Dr. J. W. Pearce, in American Practitioner and News, July 15, 02,

"To briefly relate, this is the way I treat diphtheria, and I have never lost a case. If I can get perfectly fresh antitoxine I give it, but if it can not be had perfectly fresh I do not. Whether antitoxine is given or not, I give ecthol in full doses appropriate for the age of the patient, every three hours, admin-

istered by the mouth. The entire fauces, larynx, and pharynx are sprayed with a mixture of ecthol and peroxide of hydrogen, three parts of the former to one of the latter, every fifteen to thirty minutes. Calomel in small doses is administered every hour until the bowels are thoroughly moved. Nourishing and supportive diet is given at short, regular intervals, and everything done to make the patient comfortable in the way of supplying fresh air, etc."

Formaldehyde or formalin is one of the most useful chemicals introduced to the profession in recent years. It is an aqueous solution of formaldehyde gas—40 per cent. That is the limit of its solubility in water. It is not very irritant, non-toxic and non-corrosive. It is applied in vapor or solution. In surgery it is used in one-fourth to onehalf per cent. solution. As a food preservative, one part to one hundred thousand is sufficient. It is very useful to preserve urine for future examination. Two or three drops to an ordinary sized bottle is enough to preserve the urine indefinitely. It will not interfere with any known test. It has supplanted sulphurous acid gas (the product of burning sulphur) in the disinfection of rooms. It is not so dangerous as sulphur, nor so unpleas-It does not fade wall paper or injure the color or texture of fabrics. It is cheap. There is no danger from fire as with sulphur. It is easily used. It is only necessary to hang up sheets saturated with it and see that the room is tightly closed, and that it remains so for some hours.—Summary.

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Editorial Motes.

It is only fit that we should say a word in explanation of the change in management of the Journal. Unforseen circumstances make it impossible for us to continue in active charge of the office, and during our absence from San Francisco, which we trust will only be temporary, we have placed the publication in competent hands, and we trust that the generous and sympathetic support which has been accorded us in the past will be continued. The editorial department will be in charge of Dr. D. Maclean, who needs no introduction to any eclectic physician, while the detail work of the office and general business management will be in charge of Dr. F. C. Maclean whose long experience in the office of the college particularly fits her for this work.

In the past four years we have become so interested in the work that it is hard to relinquish it, but other more important matters make it necessary. We have no fear that the Journal will retrograde and we hope that it will continue to improve.

F. J. Petersen, '00, is removed from Hopland to Watsonville.

Dr. Q. A. R. Holton is removed from Ramona to Whittier.

Dr. D. W. F. Ward, of Fortuna, was in the city recently and expressed his intention of removing to Eureka soon.

Dr. M. Schirman is now located at 1047 Franklin Street. Dr. Schirman has favored us with an interesting article on Urine; extracted verbatim from a medical work published in 1660. We hope to have it appear in the next issue.

It is a well known fact that the ordinary practitioner, while engaged in the care of the families of others, frequently neglects to provide for his own—not, of course, in the way of medical attention—and we cannot refrain from calling attention to this matter editorially.

There is no way yet devised by human ingenuity that will better safeguard the family than a good life insurance policy. There is no better insurance policy than that issued by the Equitable Life Assurance Society of the United States, which maintains offices on the entire first floor of the Crocker Building, San Francisco, A. M. Shields, Manager.

All popular forms of policies issued are placed by the Equitable, and in addition many contracts unique to this company—such, for instance, as their 5% Gold Debenture Bonds, Indemnity and full return premium policies.

It would be well for the hard-working medical fraternity to investigate what is possible to do with the Equitable. A brief note or postal of inquiry to Mr. Shields will elicit full information.

The Denver Chemical Co. has issued an extremely neat and original Calendar in fac-simile to a package of Antiphlogistine. No doubt all of our readers have received this handsome little Christmas folder, but if any have not seen it, a postal request sent to the office of the company will bring you one. It is well worth having.

Nasal Treatment of Dysmenorrhea.

Schiff's investigations go to prove the intimate relation between the socalled nasal genital spots on the anterior part of the lower turbinate bone and on the tubercula septi and the genital tract, and he made practical use of this fact by cocainizing the spots as a palliative treatment for dysmenorrhea. Out of 47 cases thus treated the pains were relieved in 72 per cent. A permanent cure may be effected by cauterization of the spots. The treatment consists in accurately locating the spots with a speculum and applying a few drops of a 20 per cent solution of cocain.—Practical Medicine Series, June, 1902.

It is reported that a physician of Roxborough has during the past three months corrected five cases of round shoulders in a novel way, says the Medical News. Noting that very fat men are not round shouldered he concluded that their straightness is due to the effort required to support their heavy abdomens. Accordingly he had a broad belt made and weighted it with lead at the front. This weight was increased gradually until one man was finally carrying twenty-five pounds. But his shoulders straightened. The method is not copyrighted.—St. Louis Review.

Many reports maintain that severe neuralgic headache is curable by small daily doses of castor oil. It probably acts by reducing the toxemia which causes the nervous irritation.—The Medicus.

A New Kind of Quackery.

Modern commercialism is thoroughly stained with the practices of imitation and substitution. This gives it a peculiar color which, at a distance, seems attractive and even brilliant; but on closer scrutiny its foulness is revealed.

Everything is imitated. The pure food, and genuine gem, and the valuable medicine find their host of inferior imitations. The professions are imitated; and the medical profession, standing highest among the avocations that insure earthly happiness, has its thousands of imitators in all forms. Quackery has ever abounded, and will continue to subsist on the ignorant and credulous.

Quackery takes a variety of forms. There is the ignorant practitioner who declares that he possesses the necessary qualifications. There is the charlatan who advertises impossible cures. There is the patent medicine vendor, who advocates the administration of his preparation for all human ills. Probably none of these have betrayed a trust, they at least are not traitors.

The newest species of quackery is found among certain manufacturers of proprietary medicines. A certain drug has been used by the profession and found valuable. The manufacturing chemist was the handmaiden of the physician. A distinct advance has been accorded practical therapeutics. The physician has used the preparation, has found its indications and contraindications, and the manufacturer has been financially benefited. He owes his suc-

cess and knowledge of his nostrum to the physician.

But the implicit faith of the physician is very rudely shaken; the handmaiden has become a monster. The manufacturer becomes engaged in the practice of quackery, and advertises his preparation to the laity. He permits individuals to make their own diagnosis if only their drug will be used for certain symptoms. It is quackery of the basest sort.

To this practice physicians must show a bold front. No drug should ever be prescribed which is advertised to the people in general. It is the vilest kind of charlatanism and its promulgators are rascals and traitors.—Courier of Medicine.

Dr. H. D. Palmer, Los Angeles, was arrested, September 26, charged with practicing medicine without a license, says the Association Journal. The information on which the complaint was based is said to have been that the accused, who calls himself a "chiropractic physician," treated an advanced case of tuberculosis by jumping on and otherwise maltreating the patient, thereby "stamping out the germs." Incidentally, the patient died.—St. Louis Medical Review

According to the Buffalo Express a New York horse doctor stood in front of a mirror and cut a cancer out of his own tongue. Even this feat, however, is not so remarkable as the fact that he appears immediately afterwards to have gone down to the newspaper offices and given the reporters an interview.—Ex.

Cancer in Holland.

Circulars were sent to all the physicians in Holland asking for information in regard to patients under treatment October 15, 1900. Many physicians did not reply to the appeal, and consequently the returns are not complete, but, such as they are, they show that the minimum number of persons affected is .0286 per cent. of the total population, and that the majority of cases occurred between 61 and 70, then from 50 to 60 and from 71 to 80. The intestine was the seat of the lesion in 49.88 per cent; 275 in men and 163 in women. In 18 per cent. of all cases several members of the family were affected. Van Iterson cites the case of two families with fourteen members, of whom eight are certainly and three probably affected with cancer. Korteweg has observed a case of cancer of the rectum in two sisters, and cancer of the mamma in grandmother, mother and daughter. Viet has observed two sisters with cancer of the cervix. A hereditary disposition was apparent in 19.7 per cent. of all cases. Conjugal cancer was noted in eleven cases, and infection of one person by another was admissible in 10.92 per cent.—Jour. Amer. Med. Association.

Vegetables as Medicine.

Asparagus is very cooling and easily digested.

Cabbage, cauliflower, Brussels sprouts and brocilli are cooling, nutritive, laxative and purifying to the blood, as a tonic; but should not be eaten too freely by delicate persons.

Celery is delicious cooked, and good for rheumatic and gouty people.

Lettuces are very wholesome. They are slightly narcotic, and lull and calm the mind.

Spinach is particularly good for rheumatism and gout, and also in kidney diseases.

Onions are good for chest ailments and colds, but do not agree with all.

Watercresses are an excellent tonic, stomachic and cooling.

Beet root is very cooling and highly nutritious, owing to the amount of sugar it contains.

Parsley is cooling and purifying.

Turnip tops are invaluable when young and tender.

Green neute shoots, if gathered in spring and cooked as spinach, form a most delicate and wholesome, bloodpurifying vegetable.

Potatoes, parsnips, carrots, turnips and artichokes are highly nutritious, but not so digestible as some vegetables. Potatoes are the most nourishing, and are fattening for nervous people.

Tomatoes are health-giving and purifying, either eaten raw or cooked.

Chili, cayenne, horse-radish and mustard should be used sparingly. They give a zest to the appetite, and are valuable stomachics. Radishes are the same, but are indigestible, and should not be eaten by delicate people.

Cucumbers are cooling, but are indigestible to many.—Public Health Jour.

In all catarrhal conditions of the urinary passages stigmata maidis exerts a curative power which is unmistakable.

The Cruelty of Foie Gras.

The sentimentalists who devote so much energy toward the suppression of experimental scientific research conducted upon the lower animals will find an abundant harvest of absolute wanton cruelty on every hand if they care to look for it. How many antivivisectionists, we wonder, eat foie gras? Do they know that it is made from the diseased livers of geese which are deliberately brought to death's door by treatment that is diabolically cruel? The unfortunate birds are cooped up indoors in boxes so arranged that the head alone can be moved. They are then crammed with a rich diet, which is forced down their gullet. Under these circumstances the liver becomes quickly affected, and in about three months has attained an enormous size from fatty degenera-The larger the liver the more successful the process. The most valuable livers are those of a green tint; that is to say, fatty livers impregnated with · bile pigments. The center of this trade is Strasburg, which sends out annually about \$750,000 worth of this delicacy. of London to exclude foie gras from the banquet recently given to the Prince of Wales has excited the liveliest alarm among the merchants of Strasburg, inasmuch as, after Paris, England is their best customer. Three months of forced feeding is required to bring the unfortunate birds to the proper pitch of organic degeneration, so that their livers may tickle the palate of fat gourmands. Of a truth, any antivivisectionist who eats foie gras is committing an act of farcical incongruity. On the one hand he is eating a toothsome morsel procured by a course of prolonged torture practiced upon a harmless domestic fowl, while on the other he is railing at scientific men whose aim in experimentation is the highest conceivable, namely, the alleviation of suffering among mankind. Meanwhile, Strasburg flourishes and science is tied hand and foot in the United Kingdom.—Medical Press.

The Place of Symphyseotomy as Contrasted with Cesarian Section.

Jewett writes on this theme in American Medicine, and reaches the following conclusions:

Symphyseotomy is still a useful operation within a limited range of pelvic contraction.

It is suited to conditions in which only very little additional space is required for delivery.

It is a valuable resource, therefore, in cases in which forceps unexpectedly prove inadequate.

about \$750,000 worth of this delicacy. Axis traction forceps with the aid of A recent petition to the civic authorities posture should always be tried before of London to exclude foie gras from resorting to symphyseotomy.

Its results would be much improved by restricting it to pelves with a conjugate of not less than 7.5 centimeters (3 inches) in simple flattening, or 9 centimeters in general contraction.

Under equally favorable conditions its total mortality should be no greater than that of Cesarian section.

When the pelvic space permits, it should replace the Cesarian operation in the presence of exhaustion.

It may be elected primarily as an alternative of Cesarian section when the operator can be assured that the degree of obstruction is well within its safe limit. Here the choice of operation is a matter of individual preference.

Within its proper field symphyseotomy is better than Cesarian section for an operator of little experience in abdominal surgery.—The Therapeutic Gazette.

Eczema-Galium-Echinacea.

Mrs. H. came to me with a very bad case of eczema, which covered the upper part of her thighs, spread up over the vulva and lower part of abdomen. The itching was so bad after she went to bed that she could not sleep or rest at times, and she was annoyed frequently through the day by the intense itching. As she had been treated by other physicians I thought it no use to employ any of the ordinary remedies. So I prescribed two drams echinacea to four ounces water, and gave teaspoonful four times a day, before meals and at bedtime; used one ounce specific galium to one ounce glycerin, and applied this to the parts that were affected, four times a day. She began to improve from the start. I followed this up for ten days, and at that time she reported as well.

I treated an old lady with a large carbuncle on the hip. She was laid up—could not walk. I gave her two drams echinacea in four ounces of water four times a day, before meals and at bedtime; applied one ounce specific galium to one ounce of glycerin; applied

frequently through the day and at night; applied unguent and slippery elm poultices; had poultices removed and applied the galium mixture through the day. She was cured in ten days.

—Dr. J. H. Emery, Blandinsville, Ill.

Bloody Stools.

The appearance of blood and mucus in a child's stool suggests at once the dreadful affection, intussusception. Yet dysentery will sometimes commence with a passage of almost pure blood. In both cases violent pains may be present in the abdomen. It may take observation for a few hours before the characteristic muco sanguinolent stools of the latter disease make their appearance.

In adults, the most common cause of bloody stools is hemorrhoids; but it may come from ulceration or malignant disease of the rectum or bowel. In typhoid fever the blood may look very red or be tarry in appearance.

Eating.

Do we not eat too often? Among most civilized people it is the usual custom to eat three, four or five times a day, while in England one occasionally meets people who regularly eat six times a day. The ancient Greeks, according to Pythagoras, ate but once a day. But his recommendation of the plan of eating twice a day was adopted, and on a diet of simple foods, consisting chiefly of wheat figs and a few vegetables; that country produced the finest race of men the world has ever seen.—Good Health.

Subcutaneous Injection of Paraffin in the Correction of Facial Deformities.

Smith (Medical Review of Reviews, September, 1902) makes the following statement in reference to his technique in subcutaneous injections of paraffin:

- 1. Thorough surgical cleaning of instruments, field of operation, and hands of operator.
- 2. four minims of a four per cent solution of cocaine is injected at the point intended for the entrance of the paraffin needle.
- 3. Thoroughly sterilized paraffin is drawn up into the syringe, allowed to cool to 90 deg. or 100 deg. F., and the set-screw then placed in position.
- 4. Needle is introduced away from the point of greatest deformity, and its point is carried forward slightly beyond this, being gradually withdrawn as injection is made, and the paraffin is slowly injected.
- 5. As the pressure is felt beneath the fingers, molding and smoothing the surface begins. This should be continued throughout the operation, thus preventing the paraffin collecting in lumps, giving rise to an irregular surface.
- 6. When sufficient paraffin has been injected the needle is removed and the point of its entrance sealed with collodion.
- 7. Ice cloths are applied for twelve to twenty-four hours, according to the amount of edematous swelling and inflammation which may immediately follow. Should this continue, a 25 per cent solution of aluminum acetate applied on cloths is of service in reducing

the inflammation. Pain has never played an important part in any of the writer's cases, and when desirable he has made the injections without the use of cocaine.

The Indications in Uterine Cancer.

Conant (American Journal of Gynecology and Surgery, October, 1902) says that cancer of the uterus is generally met in one or two forms; the squamouscell carcinoma (usually found in the cervix) and the adenocarcinoma (most commonly seen in the body). The prognosis is most favorable in the latter, and least favorable in adenocarcinoma of the cervix. In looking over a mass of statistics, one is somewhat appalled by the fact that the percentage of permanent cures is so small. But if one looks over a series of cases and picks out adenocarcinoma of the body (malignant adenoma), he will be surprised to see how large a percentage of cures there are after three years. It seems, therefore, that in the most favorable form of malignant disease, and also in the squamous-cell variety when confined to the cervix, if the diagnosis is made early, we may expect a large percentage of cures. He concludes that in all cases of cancer which are seen early, either of the cervix or the fundus, where nothing can be felt outside of the uterus, a radieal operation should be performed.

EPILEPSY AND YOUTH.—Nearly 85 per cent of all epilepsies develop before adult age is reached, and about 14 per cent of cases are distinct heritages from epileptic parents.—Exchange.

Baldness.

Baldness afflicts almost every young man who spends any considerable length of time in the Philippines. An army officer made a statement to this effect the other night as he sat on the porch of the Bala Golf Club, in Philadelphia. He was bald himself. "It took only two years of those accursed islands," he said, "to rob me of my hair. It was the same way all through my regiment. Eight men out of every ten were bald. The heat, the regimental doctors say, is what causes this calamity. The hair is wet continuously with perspiration in the Philippines, and this, together with the friction of the hat-band, irritates and inflames the scalp. There is a constant itching, and when you put your hand to relieve it you bring your fingers down full of loose hair. I am only twenty-six, and when I went out to the Philippines I had a shock like Paderewiski's. Look at me now."— Med. Review.

Therapeutic Value of Work in Hysteria and Neurasthenia.

Sidney I. Schwab (Interstate Medical Journal) says that the work cure can be tried with hope of success in that class of neurasthenic and hysterical subjects where there exists an average amount of potential physical vigor, where there is no organic nervous or other disease, and where, above all, there is found the requisite amount of intelligence and mental training to enable them to appreciate and understand the purpose and the meaning of the efforts made to

hold them. In his experience he has found very few who might not have been treated in the manner indicated if the patient's circumstances and the patience of the physician had been used to their utmost. Monier, from an experience of thirty-four cases, concludes that by means of useful manual work, hysteria and neurasthenia, in the narrowest sense of the term, can often be made to completely disappear. In cases of mental enfeeblement, psycopaths, alcoholics, according to the time of their existence, the influence of work is often very remarkable. Hypochondriacs and paranoiacs are not especially benefited. He reports the case of a woman of intelligence, but suffering from aggravated hysteria, which it seemed impossible to overcome. Bookbinding, which requires the closest attention and the greatest care in matters of detail, and which is distinctly a fine art, was tried, and has proved to be the needed remedy. There is little doubt that in less than a year the previously hysterical invalid will be able to set up her own shop and lead a useful and active life.

Prof. Adolph Lorenz, Austrian surgeon, who came to the United States to treat Ogden Armour's little daughter, passed a satisfactory examination as to his qualifications to practice medicine before the Illinois Board of Health and received a certificate testifying to that fact. Prof. Lorenz approved the course of the board, and said he was only treated as an American physician would be treated under similar conditions in Austria.—St. Louis Medical Review.

Early Symptoms of Pulmonary Tuberculosis.

Anodynes in Children.

Dr. G. C. Johnston considers the following symptoms suspicious. In the order of their importance they are:

1. Cough—A slight, hacking, persistent cough, which can be referred to the larynx or upper trachea. It is worse at night or upon lying down. There is little or no expectoration.

2. A failing Appetite.—There is a repugnance for fatty foods and some degree of indigestion.

3. Loss of Weight.—Patient is a few pounds below his average weight.

4. Sleep Sweats.—Upon lying down, day or night, the patient awakes with the neck and upper chest bathed in a warm or cold perspiration.

5. Accelerated Pulse.—A pulse of 90 to 100, which is quick, irritable, and ill sustained

6. Elevation of Temperature.—This is an unobtrusive symptom, but is of the highest importance. When a case of beginning tuberculosis is suspected, a temperature record at 2:30 p. m. on several successive days should be insisted upon. A temperature elevation of 1 deg. F. is a symptom that must be accounted for absolutely by some other condition, or tuberculosis must be suspected and confirmatory symptoms searched for.

7. Fistula in Ano.—When syphilis is eliminated, this condition calls for a careful examination of the chest.

8. Pleurisy with Effusion.—A history of pleurisy with effusion in a patient who complains of any of the above mentioned symptoms is important.—

American Medicine.

Pettit (Columbus Med. Jour., September, 1901) advocates the use of opium in children only when strongly indicated. It retains poisonous material in the alimentary canal; it checks secretions and hinders elimination; it parches the tongue and increases the fever. Many times nothing can take the place of opium, but frequently some other remedy will meet the indication. Sponging with cold water relieves headache in fevers; douching to relieve ear-ache; evacuating stomach and bowels for colic; quinine for malarial and mercury for syphilitic pains. Acetanilid has not the disadvantages of opium, but is more dangerous to life. The combination with each grain of acetanilid of one-fifth grain of milk sugar and sodium bi-carb., and one-twentieth grain of caffein and camphor monobrom, increases its safety and efficiency. Alcohol often proves useful, especially in bronchitis with painful cough. Let every resource be exhausted before prescribing an anodyne. -International Medical Magazine.

Helonias is indicated where there is a sensation of dragging in the lower bowels; it is also useful in prolapsus and in other displacements.—*Medical Summary*.

I have tested the Pepto-Mangan, and obtained very satisfactory results in a case in which nervous symptoms were particularly marked, while other iron preparations proved ineffective.

Dr. Drzycimski.

Osche, W. Prussia, August 12, 1901.

On the Danger of Spinal Anesthesia.

Mohr, in an elaborate study of general anesthesia by subarachnoid injection of cocain, finds that not only is the anesthesia limited to the lower extremities but that it frequently fails to appear altogether, and according to some authors is as high as 30% of cases is imperfect. Sometimes the anesthesia will disappear suddenly in the course of an operation. More than this, it is very frequently interrupted by undesirable and even dangerous symptoms, and in quite a number of cases has resulted in the death of the patient. He places the mortality from spinal anesthesia at the astounding figure of 1 in every 200. The most common toxic symptoms are nausea, vomiting (occurring in 20% of cases), headache, collapse, various conditions of spinal weakness, as shown by ataxia, incontinence of urine, etc. According to Polubogatow and Crile, the most serious danger lies in a too rapid extension of the fluid along the spine and consequent involvement of the medullary center. Many authors have attributed these untoward effects to the disturbance of the equilibrium of the cerebrospinal fluid. Tropacocain seems somewhat less dangerous than cocain. In comparison with inhalation anesthesia the method has the following disadvantages: Danger from the lumbar puncture through infection of the cord, uncertainty of anesthesia, insufficient duration and greater mortality. The method, therefore, is certainly not advisable save in cases in which there is reason to believe that ordinary narcosis

is dangerous or local anestheia insufficient. Unfortunately our knowledge of the comparative harmfulness of to subarachnoid injection of cocain and of the ordinary anesthesia in cases where either is dangerous is insufficient, and it is therefore almost impossible for the practitioner to make a rational choice of the case in which spinal anesthesia is to be given the preference. [H. C. W.]

The Salt Pack in Rheumatic Gout.—
Mr. Jonathan Hutchinson says in the Polyclinic, that he knows of no remedy so effectual in getting rid of irritation and synovial effusion in connection with rheumatic gout as the salt pack. This consists of flannel soaked in a saturated brine of common salt, which is wrapped around the affected joint, covered with oiled silk and a bandage, and kept on the whole night. It should be applied every night until the cure is effected.—
The Medicus.

Sanmetto in Cystitis, Urethritis, Prostatitis and General Inflammation of the Genito-Urinary Tract.

I am an earnest friend of Sanmetto. It is a valuable and ethical preparation. From years of experience in its use I have learned to rely upon it in cases of cystitis, urethritis, prostatitis and general inflammation of the genito-urinary tract. In cases where its use is indicated its curative properties are most remarkable. I am satisfied if the profession will carefully discriminate in their cases they will always be well pleased with the results obtained from the exhibition of Sanmetto. I shall continue its use where indicated.

Chicago, Ill. W. E. J. Michelet, M.D.

Hydrogen Peroxid in the Treatment of Diphtheria.

Novikov obtains fully as good results from the use of hydrogen peroxide as from serumtherapy in the treatment of diphtheria. The false membrane, it is true, detaches itself less rapidly than when serum is given, but the depressive action of the toxin of the disease is to a certain extent prevented by the peroxide, which favors oxidation. A gargle of two or three tablespoonfuls of peroxide to a glass of water is to be used night and day. For infants who cannot use a gargle the peroxide is given internally by the following formula: Hydrogen dioxide, 5 to 7 cc.; distilled water, 85 cc.; syr. simplicis, 15 cc. [A. G. E.]

A Most Seasonable Suggestion.—As the time is fast approaching when there is a demand for cough remedies, it will not be amiss to present a suggestion and a good remedy. In place of opiates which always dry up expectoration, disturb digestion, cause constipation, and render the patient uncomfortable and drowsy. The most efficient and popular cough sedative is the Antikamnia & Heroin Tablets-it relieves cough by its soothing effect upon the air-passages; does not interfere with expectoration, but renders it easier by stimulating respiratory muscles.—Notes on New Pharm. Products.

Viburnum is efficacious in dysmenorrhea of whatever character. It is safe and reliable in after-pains, promoting involution.—*The Eclectic Review*. Can Refuse to Attend a Case, but Cannot Abandon One.

It is a common mistake to suppose that a physician cannot legally refuse to attend a case to which he is summoned. But his knowledge is entirely his own, to use or not, with or without compensation, as he chooses. When once in charge of a case, however, he cannot leave it without due and timely notice, sufficient for the securance of another doctor. To abandon a patient without this precaution is to be liable for ensuing damages.—Medical Council,

ALETRIS CORDIAL is indicated as a prophylactic remedy against post-partum hemorrhage, uterine weakness, great development of the fetus and of the adnexa, and in those cases in which there is disposition to hemorrhages.

Bromoform and calcium sulphide, rightly used, abort and cure pertussis in a few days.

Case first.—"Acute Rhinitis."

A lady consulted me with a very bad cold which had been persisting to her intense annoyance for several days. She called upon me in the belief that the difficulty was increasing instead of diminishing. Posterior nasal washing was at once done, using Glyco-Thymoline in warm water, one part to six, and the nasal fossæ sprayed with cocaine solution, patient was also given a six-ounce bottle of Glyco-Thymoline solution, and advised to apply with an atomizer three times a day. Recovery was prompt and thorough under its use.

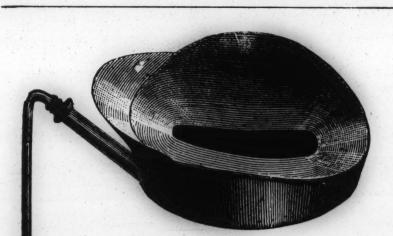
When purpuric spots come and go on the abdomen or lower extremities without assignable cause, or other symptoms indicative of purpura proper, ascertain if the patient is addicted to the use of chloral.—The Medicus.

What it Does.—Physicians throughout the United States and Canada use Daniel's Concentrated Tincture Passiflora Incarnata with the most satisfactory results in nervous exhaustion. They have learned by experience that it gives tone and quiet to the nervous system; relieves nervous headache, insomnia and nervous prostration, and acts in all cases as a splendid nerve food and tonic.

The results of Dr. Koch guaranteed to stamp out malaria in Dares-Salaam (German East Africa) in five years through the assumption that the germs were carried by mosquitos, have been so successful, says the British consul, that by the end of 1903 malaria will have disappeared entirely from the place.—The Medicus.

Iron and quinine are generally injurious to epileptics, except in cases of anemia, malaria or chlorosis.

Ringer says that in biliousness if the stools are dark podophylin is the best remedy, but if the stools are light calomel should be given.—The Medicus.



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PAPER

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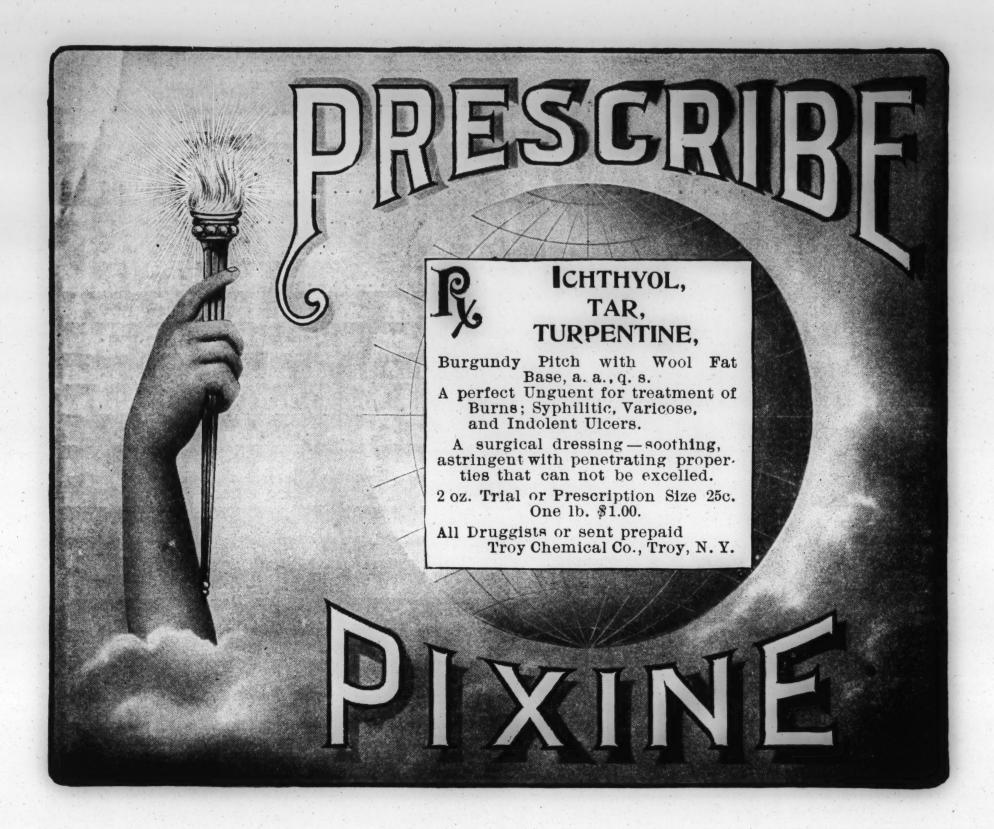
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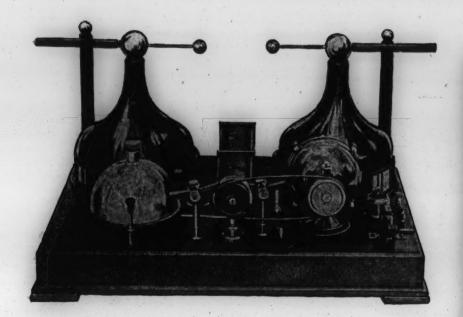
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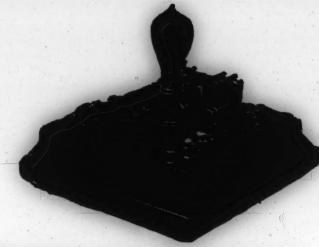
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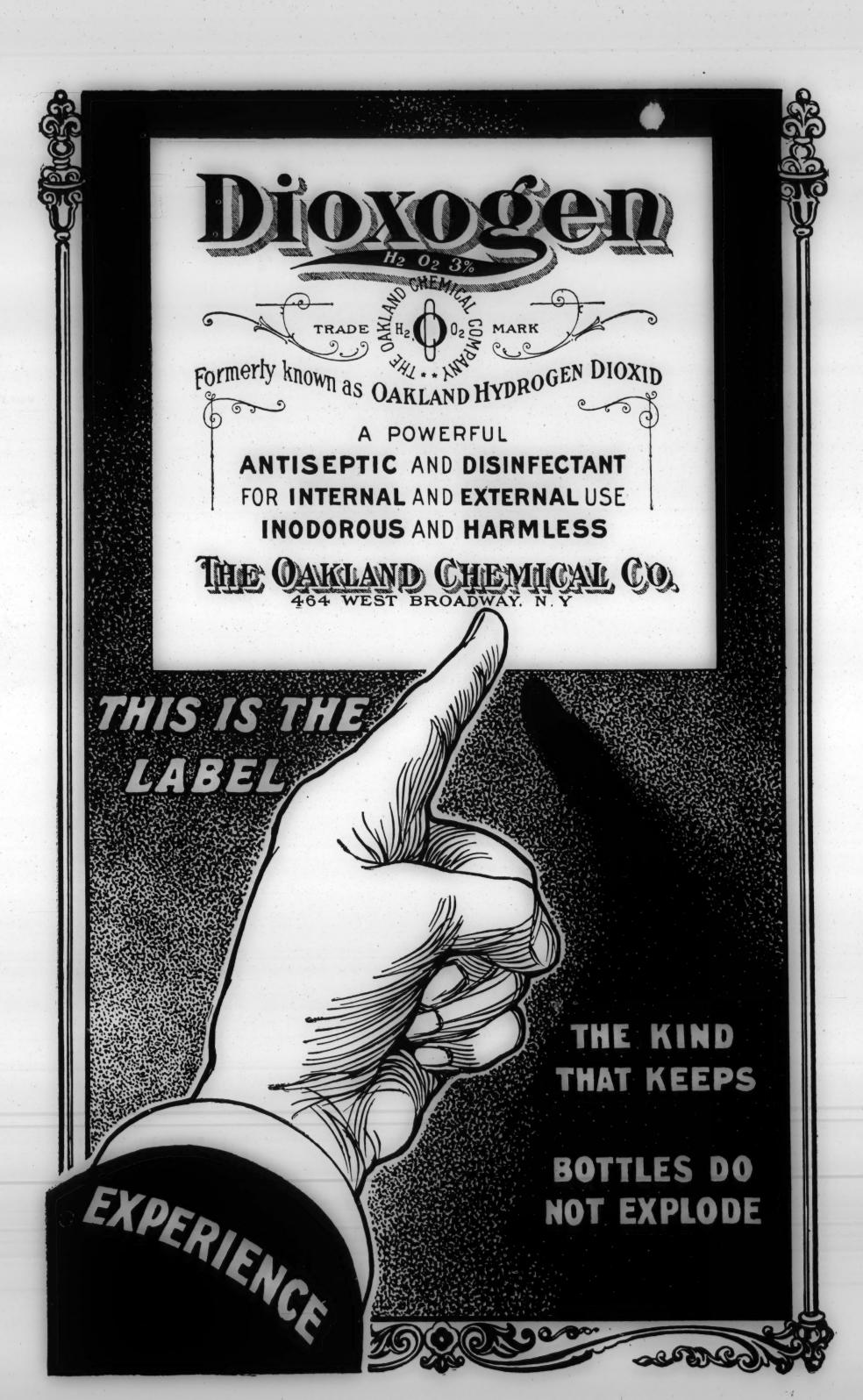
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